

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

①

PLAINTIFF	Eric Hines	COURT CASE NUMBER	17-2864 (NLH)
DEFENDANT	Gary Lanigan, et al.	TYPE OF PROCESS	Summons + Complaint
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN		
AT	Gary Lanigan ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) NJ Dept of Corrections Whittlesay Rd Trenton, NJ 08625		

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Charles H. Landesman, Esq.
 360 Kearny Ave
 Kearny, NJ 07032

Number of process to be served with this Form - 285

1

Number of parties to be served in this case

10

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

"official Capacity"

RECEIVED

JUN - 3 2019

AT 8:30 M
WILLIAM T. WALSH CLERK

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

201-991-5343

DATE

4/17/19

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
	1	No. 150	No. 650	[Signature]	4/30/19

I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

Ms. Burke

Address (complete only if different than shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Date of Service

05-15-19 11:00

Time

am

pm

Signature of U.S. Marshal or Deputy

Holland

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
65.00	3.51	—	68.51	—	68.51	—

REMARKS:

PRIOR EDITIONS
MAY BE USED

1. CLERK OF THE COURT

FORM USM-285 (Rev. 12/15/80)
(Instructions Rev. 12/08)

U.S. Department of Justice
United States Marshals Service

Case 1:17-cv-02864-NLH-MJS Document 24-1 Filed 06/15/19 Page 2 of 4

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on the reverse of this form.

2

PLAINTIFF	Eric Hines	COURT CASE NUMBER	17-2864 (NLH)
DEFENDANT	Gary Lanigan, et al	TYPE OF PROCESS	Summons + Complaint
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN		
AT	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)		
	Willie Bonds	Whittlesy Road	
	NJ Dept of Correction	Trenton, NJ 08625	

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Charles H. Landesman, Esq.
360 Kearny Ave
Kearny, NJ 07032

Number of process to be served with this Form - 285

1

Number of parties to be served in this case

10

Check for service on U.S.A.

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Fold

"Official Capacity"

RECEIVED

JUN - 3 2019

AT 8:30 M
WILLIAM T. WALSH CLERK

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

201-911-5343

DATE

4/17/19

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I acknowledge receipt for the total number of process indicated.
(Sign only first USM 285 if more than one USM 285 is submitted)

Total Process

1

District of Origin

No. 150

District to Serve

No. 150

Signature of Authorized USMS Deputy or Clerk

NA

3:55

4/30/19

I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

WKS. BURKE

NJ DOC ATTY

Address (complete only if different than shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Date of Service

05-15-19

Time

11:00 am

Signature of U.S. Marshal or Deputy

Holland

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
65.00	3.51	—	68.51	—	68.51	—

REMARKS:

PLAINTIFF	Eric Hines	COURT CASE NUMBER	17-2804 (NLH)
DEFENDANT	Gary Larrigan, et al	TYPE OF PROCESS	Summons + Complaint
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN		
AT	Dr Scott Miller		
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)		
	3635 Quakerbridge Rd, Suite 3 Hamilton, NJ 08016		

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Charles H. Landesman, Esq
360 Kearny Ave
Kearny NJ 07032

Number of process to be served with this Form - 285

1

Number of parties to be served in this case

10

Check for service on U.S.A.

2019 JUN 3 3:54

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

Office name is Champion Orthopedic

RECEIVED

JUN - 3 2019

Signature of Attorney or other Originator requesting service on behalf of:

Charles H. Landesman, Esq

PLAINTIFF

DEFENDANT

TELEPHONE NUMBER
201-991-5343

DATE

4/17

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. ASD	District to Serve No. ASD	Signature of Authorized USMS Deputy or Clerk [Signature]	Date 4/30/19
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

Nyshera Peterson - Supervisor

Address (complete only if different than shown above)

☒ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Date of Service
05-17-19

Time
1600 pm

Signature of U.S. Marshal or Deputy

[Signature]

Service Fee 65	Total Mileage Charges (including endeavors) 9.36	Forwarding Fee	Total Charges 74.36	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

4

PLAINTIFF	Eric Hines	COURT CASE NUMBER	17-2864 (NLH)
DEFENDANT	Gary Lanigan, et al	TYPE OF PROCESS	Summons + Complaint
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN New Jersey Department of Corrections		
AT	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) Whittlesey Road, Trenton, NJ 08625		

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Charles H. Landesman, Esq.
360 Kearny Ave
Kearny, NJ 07032

Number of process to be served with this Form - 285	1
Number of parties to be served in this case	10
Check for service on	2019 JUN 25 PM 3:55

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Fold

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JUN - 3 2019

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WILLIAM T. WALSH CLERK

Signature of Attorney or other Originator requesting service on behalf of:

Charles H. Landesman

☐ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER
201-991-5343

DATE
4/17/19

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☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

MS. BURLIE NJDC Atty.

Address (complete only if different than shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Date of Service
05-15-19
Time
11:05 am

Signature of U.S. Marshal or Deputy

Holland

Service Fee 65.00	Total Mileage Charges (including endeavors) 3.51	Forwarding Fee —	Total Charges 68.51	Advance Deposits —	Amount owed to U.S. Marshal or 68.51	Amount of Refund —
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REMARKS: